



Maryland Weekly Influenza Surveillance Activity Report

A summary of influenza surveillance indicators reported to MDH for the week ending April 20, 2019

Prepared by the Division of Infectious Disease Surveillance
Prevention and Health Promotion Administration
Maryland Department of Health

The data presented in this document are provisional and subject to change as additional reports are received.

SUMMARY

During the week ending April 20, 2019 influenza-like illness (ILI) intensity in Maryland was **MINIMAL** and there was **REGIONAL** geographic activity. The proportion of outpatient visits for ILI reported by Sentinel Providers increased. The proportion of outpatient visits for ILI reported by Maryland Emergency Departments decreased. The proportion of MRITS respondents reporting ILI slightly increased. Clinical laboratories reported a decrease in the proportion of specimens testing positive for influenza. One hundred and ninety specimens tested positive for influenza at the MDH lab. There were 46 influenza-associated hospitalizations. There were two respiratory outbreaks reported to MDH.

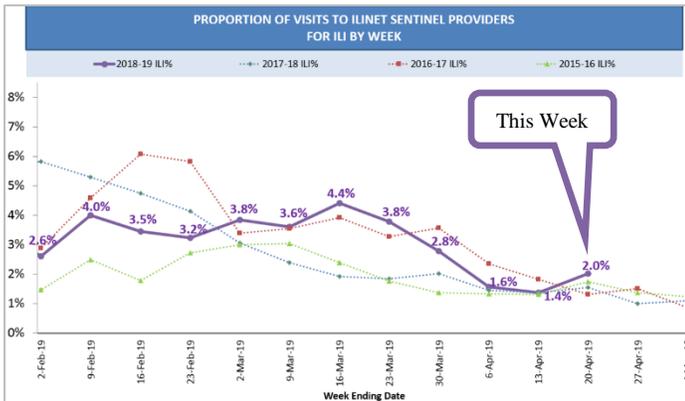
[Click here to visit our influenza surveillance web page](#)

ILI Intensity Levels
✓ Minimal
Low
Moderate
High

Influenza Geographic Activity
No Activity
Sporadic
Local
✓ Regional
Widespread

ILINet Sentinel Providers

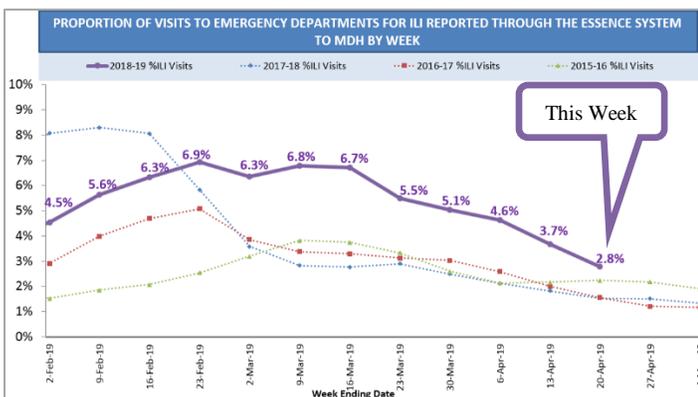
Nineteen providers reported a total of 4,112 visits this week. Of those, 83 (2.0%) were visits for ILI. This is at the Maryland baseline of 2.0%.



ILI Visits To Sentinel Providers By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	19 (23%)	38 (35%)	1,672 (33%)
Age 5-24	43 (52%)	44 (40%)	2,148 (43%)
Age 25-49	6 (7%)	13 (12%)	645 (13%)
Age 50-64	8 (10%)	9 (8%)	364 (7%)
Age ≥ 65	7 (8%)	6 (5%)	225 (4%)
Total	83 (100%)	110 (100%)	5,054 (100%)

Visits to Emergency Departments for ILI

Emergency Departments in Maryland reported a total of 56,496 visits this week through the [ESSENCE surveillance system](#). Of those, 1,569 (2.8%) were visits for ILI.



ILI Visits To Emergency Departments By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	340 (22%)	403 (18%)	12,234 (19%)
Age 5-24	469 (30%)	750 (34%)	19,525 (31%)
Age 25-49	463 (30%)	631 (28%)	19,576 (31%)
Age 50-64	177 (11%)	265 (12%)	8,025 (13%)
Age ≥ 65	120 (8%)	184 (8%)	4,379 (7%)
Total	1,569 (100%)	2,233 (100%)	63,739 (100%)

Neighboring states' influenza information:

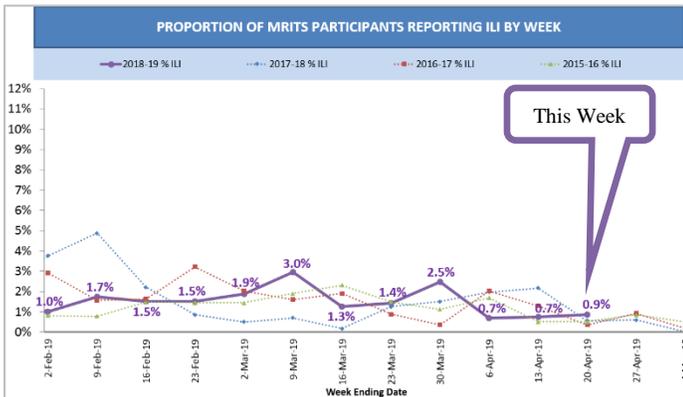
- Delaware <http://dhss.delaware.gov/dph/epi/influenzahome.html>
- District of Columbia <http://doh.dc.gov/service/influenza>
- Pennsylvania <http://www.health.pa.gov/My%20Health/Diseases%20and%20Conditions/I-L/Pages/Influenza.aspx#.V-LtaPkrJD8>
- Virginia <http://www.vdh.virginia.gov/epidemiology/influenza-flu-in-virginia/influenza-surveillance/>
- West Virginia <http://dhhr.wv.gov/oeops/disease/flu/Pages/fluSurveillance.aspx>

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Community-based Influenza Surveillance (MRITS)

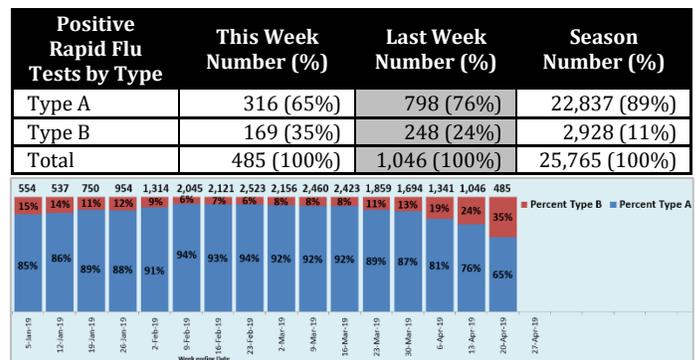
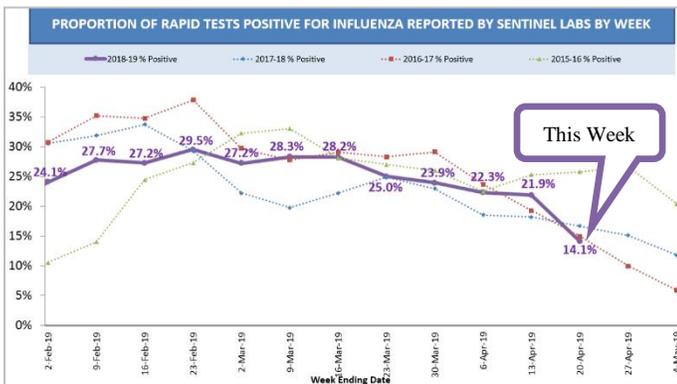
MRITS is the Maryland Resident Influenza Tracking System, a weekly survey for influenza-like illness (ILI). A total of 582 residents responded to the [MRITS survey](#) this week. Of those, 5 (0.9%) reported having ILI and missing 8 cumulative days of regular daily activities.



MRITS Respondents Reporting ILI By Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	1 (20%)	0 (0%)	14 (6%)
Age 5-24	1 (20%)	2 (50%)	59 (27%)
Age 25-49	1 (20%)	0 (0%)	54 (24%)
Age 50-64	1 (20%)	1 (25%)	52 (24%)
Age ≥ 65	1 (20%)	1 (25%)	42 (19%)
Total	5 (100%)	4 (100%)	221 (100%)

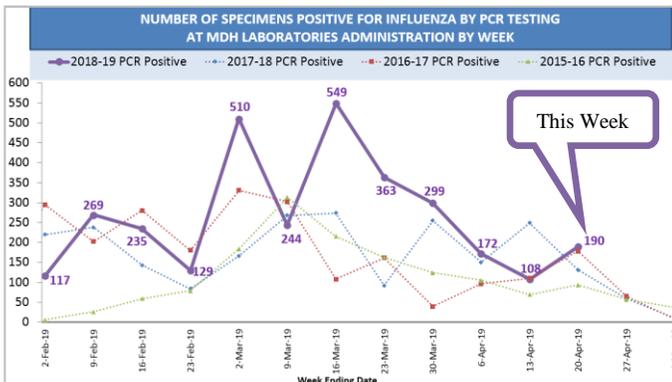
Clinical Laboratory Influenza Testing

There were 61 clinical laboratories reporting 3,444 influenza diagnostic tests, mostly rapid influenza diagnostic tests (RIDTs). Of those, 485 (14.1%) were positive for influenza. Of those testing positive, 316 (65%) were influenza Type A and 169 (35%) were influenza Type B. The [reliability of RIDTs](#) depends largely on the conditions under which they are used. False-positive (and true-negative) results are more likely to occur when the disease prevalence in the community is low, which is generally at the beginning and end of the influenza season and during the summer.



State Laboratories Administration Influenza Testing

The MDH Laboratories Administration performed a total of 264 PCR tests for influenza and 190 (72.0%) were positive for influenza. Of those testing positive, 53 (28%) were positive for Type A (H1), 121 (64%) were positive for Type A (H3), 9 (5%) Type B (Victoria) and 7 (4%) Type B (Yamagata). PCR testing is more reliable than RIDT. The MDH testing identifies subtypes of influenza A and lineages of influenza B, information that is not available from the RIDT results. The table below summarizes results by type, subtype, and lineage.



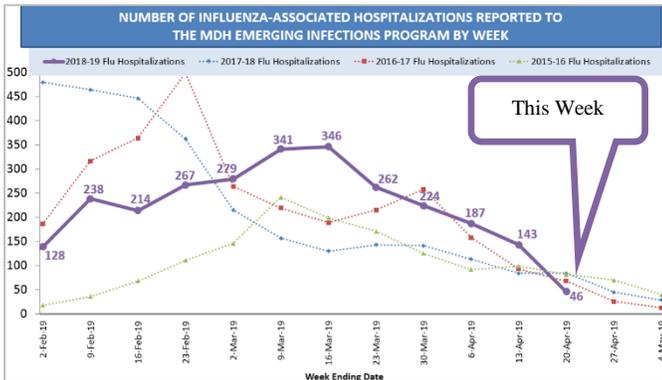
Positive PCR Tests by Type (Subtype)	This Week Number (%)	Last Week Number (%)	Season Number (%)
Type A (H1)	53 (28%)	46 (43%)	2,335 (62%)
Type A (H3)	121 (64%)	62 (57%)	1,286 (34%)
Type B (Victoria)	9 (5%)	0 (0%)	83 (2%)
Type B (Yamagata)	7 (4%)	0 (0%)	49 (1%)
Dual Type A (H1/H3)	0 (0%)	0 (0%)	9 (<1%)
Total	190 (100%)	108 (100%)	3,762 (100%)

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Influenza-associated Hospitalizations

A total of 46 influenza-associated hospitalizations were reported this week. (A person with an overnight hospital stay along with a positive influenza test of any kind, e.g., RIDT or PCR, is considered an “influenza-associated hospitalization” for purposes of influenza surveillance.) This surveillance is conducted as a component of the Maryland Emerging Infections Program.



Influenza-Associated Hospitalizations by Age Group	This Week Number (%)	Last Week Number (%)	Season Number (%)
Age 0-4	2 (4%)	6 (4%)	241 (7%)
Age 5-17	3 (7%)	5 (3%)	167 (5%)
Age 18-24	3 (7%)	7 (5%)	78 (2%)
Age 25-49	5 (11%)	24 (17%)	555 (17%)
Age 50-64	12 (26%)	28 (20%)	848 (26%)
Age ≥ 65	21 (46%)	73 (51%)	1,364 (42%)
Total	46 (100%)	143 (100%)	3,253 (100%)

Influenza-associated Deaths

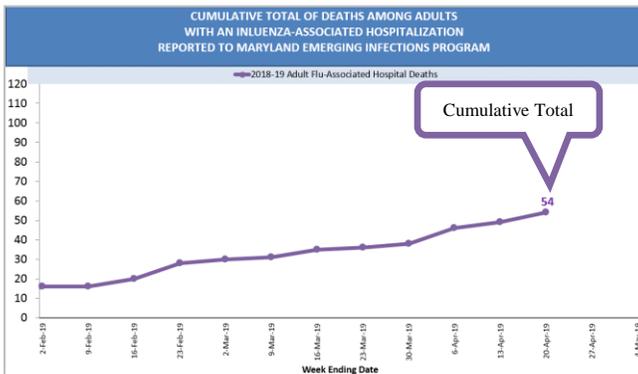
An influenza-associated death is one with a clinically compatible illness and a positive influenza test of any kind.

Pediatric Deaths: The total number of pediatric (< 18 years of age) deaths reported this influenza season is 2.

Influenza-associated pediatric mortality is a reportable condition in Maryland. Pediatric deaths are tracked without regard to hospitalization.

Adult Deaths Among Hospitalized Patients: A cumulative season total of 54 deaths have been reported among adults admitted to Maryland hospitals.

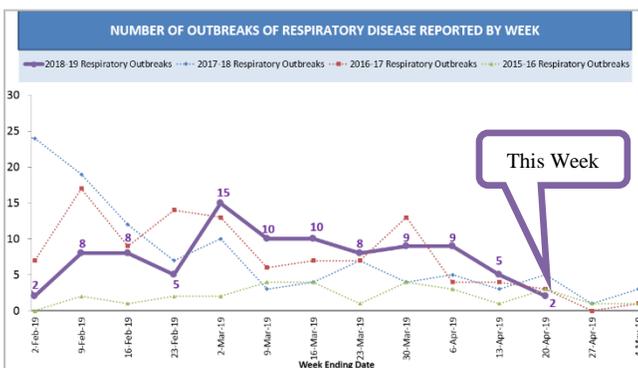
Influenza-associated adult mortality is *not* a reportable condition in Maryland. However, surveillance for mortality in hospitalized adults is conducted as a component of the Maryland Emerging Infections Program.



Influenza-Associated Deaths	Cumulative Season Total
Pediatric Deaths (Age < 18)	2
Adult Deaths (in hospitalized cases)	54

Outbreaks of Respiratory Disease

There were two respiratory outbreaks reported to MDH this week. (Disease outbreaks of any kind are reportable in Maryland. Respiratory outbreaks may be reclassified once a causative agent is detected, e.g., from ILI to influenza.)



Respiratory Outbreaks by Type	This Week Number (%)	Last Week Number (%)	Season Number (%)
Influenza	1 (50%)	3 (60%)	83 (67%)
Influenza-like Illness	0 (0%)	1 (20%)	20 (16%)
Pneumonia	1 (50%)	1 (20%)	20 (16%)
Other Respiratory	0 (0%)	0 (0%)	0 (0%)
Total	2 (100%)	5 (100%)	123 (100%)

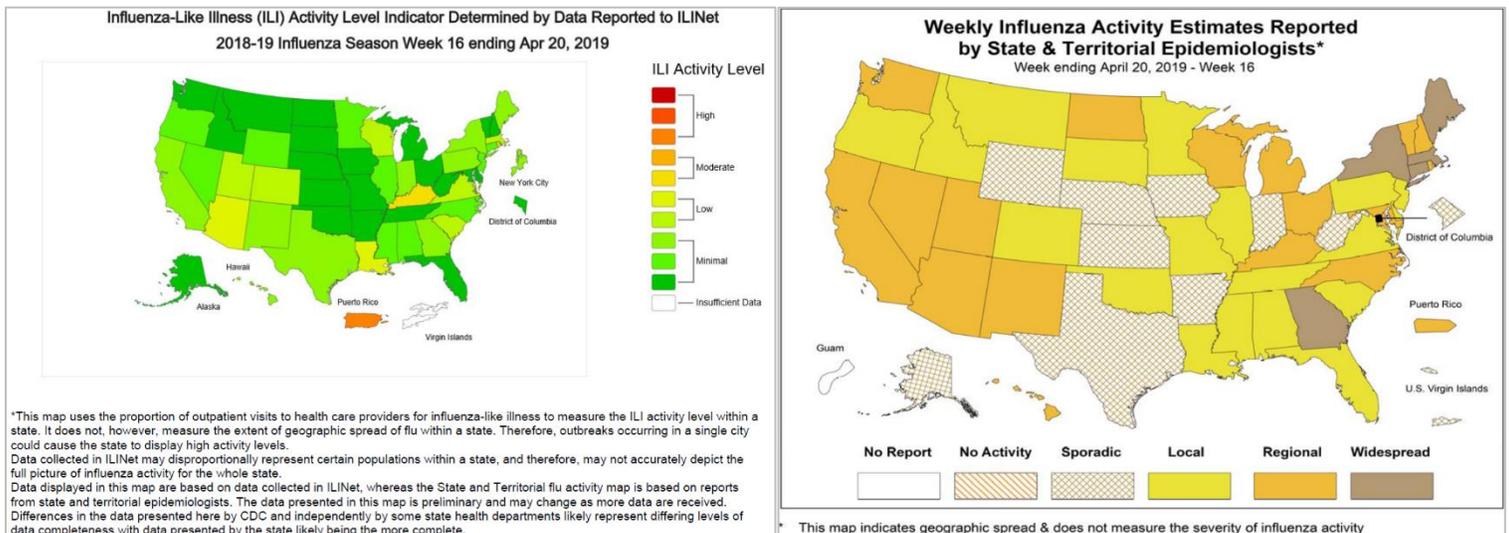
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National Influenza Surveillance (CDC)

Influenza activity continues to decrease in the United States. Influenza A (H1N1)pdm09 viruses predominated from October to mid-February, and influenza A(H3N2) viruses have been more commonly identified since late February. Small numbers of influenza B viruses also have been reported..

- **Viral Surveillance:** The percentage of respiratory specimens testing positive for influenza viruses in clinical laboratories decreased. During the most recent three weeks, influenza A(H3) viruses were reported more frequently than influenza A(H1N1)pdm09 viruses nationally, and in all 10 HHS Regions.
- **Influenza-like Illness Surveillance:** The proportion of outpatient visits for influenza-like illness (ILI) decreased to 2.1%, which is below the national baseline of 2.2%. This is the first week ILI activity was below the national baseline since mid-November 2018. Four of 10 regions reported ILI at or above their region-specific baseline level.
- **Geographic Spread of Influenza:** The geographic spread of influenza in five states was reported as widespread; Puerto Rico and 17 states reported regional activity; 19 states reported local activity; the District of Columbia, the U.S. Virgin Islands and nine states reported sporadic activity; and Guam did not report.
- **Influenza-associated Hospitalizations:** A cumulative rate of 64.2 laboratory-confirmed influenza-associated hospitalizations per 100,000 population was reported. The highest hospitalization rate is among adults 65 years and older (214.1 hospitalizations per 100,000 population).
- **Pneumonia and Influenza Mortality:** The proportion of deaths attributed to pneumonia and influenza (P&I) was below the system-specific epidemic threshold in the National Center for Health Statistics (NCHS) Mortality Surveillance System.
- **Influenza-associated Pediatric Deaths:** Five influenza-associated pediatric deaths were reported to CDC during week 16.
- **Outpatient Illness Surveillance:** Nationwide during week 16, 2.1% of patient visits reported through the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) were due to influenza-like illness (ILI). This percentage is below the national baseline of 2.2%. (*ILI is defined as fever (temperature of 100°F [37.8°C] or greater) and cough and/or sore throat.*)
- On a regional level, the percentage of outpatient visits for ILI ranged from 0.8% to 3.2% during week 16. Four of 10 regions (Regions 1, 2, 8 and 9) reported a percentage of outpatient visits for ILI at or above their region-specific baseline



Where to get an influenza vaccination

Interested in getting a flu vaccine for the 2018-19 influenza season? Go to <https://phpa.health.maryland.gov/influenza/Pages/getvaccinated.aspx> and click on your county/city of residence. You will be redirected to your local health department website for local information on where to get your flu vaccine.